FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # P95000093407 (1)

1. Corporation Name

REAL-WAY BUSINESS BROKERS, INC.

Principal Place of Business Mairing Address 3500 NORTH STATE ROAD 7 3500 NORTH STATE			ND 7			
SUITE 100 FT. LAUDERDALE FL 33319		SUITE 100 FT. LAUDERDALE FL 33319		3. Date Incorporated or Qualified 12/07/1995	3a. Date of Last	Report
2. Principal Plac	on of Business	2a. Mailing Address		4. FEI Number	<u> </u>	Applied For
21 7/77 W	. OAKLAND PARK BLUD	26 A.O. BOX /	16866	65-062805	9	Not Applicable
Suite, Apt. #		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.7	5 Additional Required
City & State		City & State	, 4	6. Election Campaign Financing	\$5. 0	00 May Be
23 FT. LAU	DERBALE, FCA	28 PLANTATIO		Trust Fund Contribution		led to Fees
コ ^{スロ} 33	3/3 Country CA.	^{Zip} 33318	Country SA	8. This corporation has liability for in Florida Statutes Yes		s 199.032,
24	9. Name and Address of Current	1231	30 3.3	10. Name and Address of New Re		
			81 Name	B. T. RUBIN		
LOOMAR,	LG	Address (P.O. Box Number is Not Acceptable	8)			
				77 W. OAKLAND PAR	K BOULEV	LARA
			84 City		85	Zip Code 3 3 3 / 3
		1 007 4500 FL 11 Oct 4	FOA	et Lauderdace	FL []	33313
or registere	the provisions of Sections 507.0502 a d agent, or both, in the State of Florida	no 607.1508, Florida Statute . Soch change was authorize	s, the above-named co d by the corporation's	orporation submits this statement for the purp board of directors. I hereby accept the appo	intment as registers	ed agent. Lam
familiar with	, and accept the obligations of Section	1 607.0505, Florida Statutes.				
SIGNATURE	Ignuture, typed or printed name of registered agent ar	d title if applicable (NOT	E Registered Agent signature n	equired when reinstating	-23-96 DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECT	IORS IN 12
TIFLE	D	₩ DELETE	1. 1 TITLE	PRESIDENT	Change	Addition
NAME	RUBIN, MARLENE	•	1.2 NAME	D T. Quein		
STREET ADDRESS	et address 3500 N. STATE ROAD 7 SUITE 100			7177 W. DAKLAND PAR	k BOULBUA	AD
CITY-ST-ZIP	FT. LAUDERDALE FL 33319		1.4 CITY - ST - ZIP	FT. LAUDERDALE FLA	353/3	
TATLE		☐ DELETE	2 1 TITLE	,	☐ Change	E Addition
NAME			2 2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2 4 City-St-ZiP			63 4400
TITLE		☐ DELETE	3. 1 TITLE		☐ Change	E Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3. STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4 CITY-ST-ZIP 4.1 TITLE		Change	E Addition
NAME		Docen	4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
1IFLE		DELETE	5 1 TITLE		Change	E Addition
NAME			5.2 NAME			
STREET ACORESS			5 3 STREET ADDRESS			
CITY-ST-ZIP			5 4 CiTY-ST-ZIP			
TITLE		☐ DELETE	6 1 TITLE		Change	E Addition
NAME			62 NAME			
STREET ADDRESS			63 STREFT ADDRESS			
CITY - ST-ZIP			64 CITY - ST - ZIP			
certify that oath; that I	the information indicated on this annua	I report or supplemental annu ition or the receiver or trustee	ial report is true and ac empowered to execut	alify for the exemption stated in Section 119.6 ccurate and that my signature shall have the s te this report as required by Chapter 607, Flo	same legal effect as	s if miage unger

HINTED NAME OF SIGNING OFFICER OR DIRECTOR

4- 23-96 (954) 146-4000 Date Dayling Phone #